DEPARTMENT OF HEALTH CARE SERVICES STAKEHOLDER ADVISORY COMMITTEE Monday October 21, 2013 3:30AM – 5:00PM WEBINAR MEETING SUMMARY

### **Attendance**

Members Attending:

Cathy Senderling, County Welfare Directors Association; Kristen Golden Testa, The Children's Partnership/100% Campaign; Katie Murphy, Neighborhood Legal Services-Los Angeles and Health Consumer Alliance; Anthony Wright, Health Access California; Kim Lewis, National Health Law Program; Elizabeth Landsberg, Western Center on Law and Poverty; Richard Thomason, Blue Shield of California Foundation; Judith Reigel, County Health Executives Association of California; Michelle Cabrera, Service Employees International Union; Chris Perrone, California HealthCare Foundation; Anne Donnelly, Project Inform; Al Senella, CA Association of Alcohol and Drug Program Executives/ Tarzana Treatment Center; Michael Humphrey, Sonoma County IHSS Public Authority; Melissa Stafford Jones, CA Association of Public Hospitals and Health Systems; Rachel Wick, Blue Shield of California Foundation; Lee Kemper, County Medical Services Program; Rusty Selix, CA Council of Community Mental Health Agencies

### Members Not Attending:

Marilyn Holle, Disability Rights CA; Stuart Siegel, Children's Specialty Care Coalition; Brenda Premo, Harris Family Center for Disability and Health Policy; Mitch Katz, MD, LA County Department of Health Services; Gary Passmore, CA Congress of Seniors; Sandra Goodwin, CA Institute for Mental Health; Richard Thorp, MD, CA Medical Association; Marvin Southard, LA County Department of Mental Health; Jim Gomez, CA Association of Health Facilities; Bob Freeman, CenCal Health; Kelly Brooks, CA State Association of Counties; Teresa Favuzzi, CA Foundation for Independent Living Centers; Anne McLeod, California Hospital Association; Ingrid Lamirault, Alameda Alliance for Health; Marty Lynch, Lifelong Medical Care and California Primary Care Association; Steve Melody, Anthem Blue Cross/ WellPoint; Herrmann Spetzler, Open Door Health Centers; Suzie Shupe, CA Coverage & Health Initiatives; Bill Barcelona, CA Assoc. of Physician Groups;

Others Attending: DHCS staff: Toby Douglas, Jane Ogle, Allan Roush, Brenda Grealish, Tara Naisbitt, Anastasia Dodson

Public in Attendance: 37

The meeting was called to order at 3:30 pm

Meeting materials: http://www.dhcs.ca.gov/Pages/October212013SACMeeting.aspx

## Welcome, Purpose of Stakeholder Advisory Committee Webinar, Introduction of Members and Review Today's Agenda;

Toby Douglas, Director, DHCS

- Heading to 2014 and Implementation of ACA: Updates
- Next Meetings: Webinar October 21 and November 20

Douglas welcomed everyone and let everyone know that this is an additional meeting of the stakeholder group. He explained the process for input and questions during the webinar. There will be an in person meeting November 20, 2013. SAC members introduced themselves.

Douglas reviewed the day's agenda.

# **Low-Income Health Program Transition Alan Roush, DHCS**

Presentation slides can be found at:

http://www.dhcs.ca.gov/Pages/October212013SACMeeting.aspx

Presented updates included program enrollment, transition notices, re-verification, continuity of care plan, data transitions and other updates.

Mari Cantwell, DHCS: We are working with health plans and CMS on rate setting and we will have initial rates to share in early Nov

Katie Murphy, Neighborhood Legal Services: How far will the Continuity of Care provision go for the LIHP transition population –is it for specialists only. What can you tell us about this?

*Ogle:* We are working on policy to ensure continuity and a smooth transition into plans. The policy is coming out soon.

Douglas: The overarching issue is that we are seeing a high level of provider linkage between the LIHP and Medi-Cal health plans. We are finalizing policies and do not have information on that for today. I want to emphasize that this group differs from the SPD transition. COC individuals have already gone through a health assessment and will get all the same services they got in the LIHP. It may not be same provider but it is the same service.

Katie Murphy, Neighborhood Legal Services: Yes, it is the same service. I am trying to gauge how far does COC go on the provider side – for that small group where providers do not match up.

Anthony Wright, Health Access California: It's good news that all counties that were eligible accepted the option to suspend re- determination. For the two that chose two months, what is the rationale and impact?

Roush: CMSP was one. They were already into the process for October redetermination so they will suspend for November and December. Ventura also chose two months – I don't have the reason. I can let you know in follow up.

Elizabeth Landsberg, Western Center on Law and Poverty: You referred to transitioning from HCC to Covered CA but just to be clear, they will still have to go through the application process, correct?

*Douglas*: Yes, CovCA will reach out but the applicant will have to complete the full process. This is facilitation of their transition but is not deeming or formal linkage.

Kim Lewis, National Health Law Program: For those who enroll after Nov 15<sup>th</sup>, what will happen?

*Douglas*: The main point is that they will go into plans. If they are close to the deadline, they will have a shorter choice period or they will be defaulted into a plan and have a choice period after that. If enrolled after 25<sup>th</sup> of December, they will go into FFS.

### Behavioral Health Services Transition to Medi-Cal Managed Care Brenda Grealish and Jane Ogle, DHCS

Presentation slides can be found at:

http://www.dhcs.ca.gov/Pages/October212013SACMeeting.aspx

Toby Douglas provided some context for Substance Use transition prior to slides explaining the Mental Health transition. This is a wonderful opportunity to expand – we are adding intensive outpatient, residential and inpatient detox services. DHCS is working on a state plan amendment to accomplish this expansion. For the most part, services will run through the Drug Medi-Cal Program and Medi-Cal Fee For Service Program. There is work going on to look at provider certification to bring on new providers as well as the monitoring and oversight needed. We are looking at how we might reorganize the Drug Medi-Cal Program to be patient-centered.

Ms Grealish and Ms Ogle presented slides primarily focused on Mental Health transition and timelines.

Douglas: A continuing theme is that we will not stop the transition work on January 1, 2014. We will continue to work on an iterative process following the initial transition.

Kim Lewis, National Health Law Program: Do you have a draft of the beneficiary notice that will go out in November/December mailing?

Douglas: Yes, it is on target. We can get that out to everyone.

Kim Lewis, National Health Law Program: Will the Mental Health plans have an obligation to get informing materials to their consumers? They are not used to having this benefit, and they may need help understanding the new information. Douglas: There will be effort from the medical health plan. You are raising the question of what can county mental health plans do on this change? We are working with The California Endowment to reach out and inform all beneficiaries about the changes. We plan to put together a simple handout about the changes and what it means to them.

Al Senella, CA Association of Alcohol and Drug Program Executives/ Tarzana
Treatment Center: I think IMD exclusion issue will have to be resolved over a longer
time period and won't be resolved for January 1st. There is confusion about detox

services - the definition and where services can be provided. There is some indication that it will be provided in general acute facilities but not free standing psych and some other facilities? If this is accurate, it may result in access issues.

Douglas: I do not have the answer. We need to get more information and follow up with you. We will report back in November.

Anne Donnelly, Project Inform: We are facing a similar situation for people with HIV as we faced with LIHP. There are MH/SU providers that are unique and are part of Ryan White service system that are not part of managed care or medical plans. I want to raise as an ongoing issue that there need to be linkages and outreach to these providers as recipients move from Ryan White to services through the medical plans.

Douglas: Thank you for flagging that. It would be good to get a list of those providers and share it with the plans.

## January 1st System Readiness Anastasia Dodson, DHCS; Cathy Senderling, CWDA

Presentation slides can be found at:

http://www.dhcs.ca.gov/Pages/October212013SACMeeting.aspx

This is an update of where we are. This will be an ongoing process beyond January 2014. There will be an update at the November meeting.

Katie Murphy, Neighborhood Legal Services: Cathy, can you post the documents you mentioned (policies, work flows, training)?

*Dodson*: Yes, these are currently posted on other web sites and we can post links to these on the DHCS web site.

Kristen Golden Testa, The Children's Partnership/100% Campaign: What is the timing for the connection to verification data sources? What are the connections you will make - to state data sources?

Douglas: Are you asking about the federal hub? Some data connections will be up in January and others will come up in the spring. We can give you a full list and follow up to get you the specifics.

## Hospital Presumptive Eligibility Tara Naisbitt, DHCS

Presentation slides can be found at:

http://www.dhcs.ca.gov/Pages/October212013SACMeeting.aspx

## Express Lane Eligibility Tara Naisbitt, DHCS

Presentation slides can be found at:

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Ms Naisbitt provided an overview and update.

Michelle Cabrera, SEIU: You mentioned you are analyzing different options for presumptive eligibility, can you elaborate on when you will come forward with additional information.

*Naisbitt:* We are in a planning process now working with the hospital association. The information will be out very soon and will be posted on the web site.

Anthony Wright, Health Access: you mentioned 600,000 -730,000 potential eligibles. Is this only Cal-Fresh? What is the estimate for other programs – state-only and parents? You mentioned a phasing process – can you talk more about this timeline? Naisbitt: Yes, the number is only Cal-Fresh. We have no information about how many potential eligibles might be in other programs. On the timeline, we will try to do a short phase of several months – we want to be cognizant of county needs and timelines. Douglas: We want to get people into coverage and this is a large number of people so we have balance the operational challenges and work through them.

Kristen Golden Testa, The Children's Partnership/100% Campaign: Do you have a breakout of the number of kids in the eligible number you mentioned? How do you reconcile the differences in methodologies between the programs' eligibility? Douglas: The eligible mentioned are all adults. On eligibility, the law allows us to assume they are eligible. If you are on Cal-Fresh, we can deem you into Medi-Cal.

Katie Murphy, Neighborhood Legal Services: When you say Express Lane, do you also include the people who come into the system later? For example, at some point in 2014, you will identify the express lane eligible consumers through the system and contact them, but what if they don't respond to this outreach and come in later? Is this a one-time event? What if they fit the criteria for an affirmation but come in later? Douglas: This is a good question – I need to follow up.

Katie Murphy, Neighborhood Legal Services: Will there be Express Lane for restricted Medi-Cal?

Douglas: This is not for restricted scope, it is only for full scope.

## Rural Managed Care Expansion Jane Ogle, DHCS

Presentation slides can be found at: <a href="http://www.dhcs.ca.gov/Pages/October212013SACMeeting.aspx">http://www.dhcs.ca.gov/Pages/October212013SACMeeting.aspx</a>

Ms Ogle presented an update on rural expansion including a map of counties impacted.

Cathy Senderling, CWDA: We have received comments from consumers who have children who used to be in Healthy Families and now want to enroll in Medi-Cal. They are receiving a notice that they are not eligible because they have a Share of cost. We think health care options staff are confusing the SOC program with the children's

premium program. Have you been able to communicate with health care options about this?

Douglas: Thank you for raising that and we will clarify the information.

#### **Public Comment**

Kristine Marck California Medical Association: Can you post the link for the LIHP? Does CMA have a representative on this stakeholder group? Douglas: Yes, we can post a link. The Stakeholder Advisory Committee does have a representative from the CMA (Richard Thorp, MD).

Ellen Wu, California Pan Ethnic Health Network (SAC member): Will the network adequacy requirements apply to mental health services? What are the plans for monitoring to make sure beneficiaries are getting access to the mental health services? Douglas: This is iterative process and we are working through getting the benefits covered. By the end of March, they will need to have a Knox Keene license. This means they will have to certify network adequacy.

Lee Kemper, County Medical Services Program (SAC member): Where is Kaiser participation – can you repeat?

*Ogle*: El Dorado, Placer and Calaveras Counties. This is where Kaiser had a previous Healthy Families program.

Douglas thanked the Blue Shield of California Foundation and the California HealthCare Foundation for all of their support including their input to the agendas and the meetings and Bobbie Wunsch for her help in preparing topics for the agenda.

The next in-person DHCS Stakeholder Advisory Committee will be on Wednesday, November 20, 2014.